

## **CLAIMS ONLY**

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

|       | AS FILED   |             | 1st AME  | TER<br>NDMENT                                    |              | AFTER<br>2nd AMENDMENT                           |  |
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|       | IND.   | DEP.        | IND.   | OEP.   | iND.         | DEP.   |  |
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| TOTAL | 17   |             |  |  |              |  |  |
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| 100<br>TOTAL  |  | <del></del>                                      | +  | <del></del>                                      | <del></del>                                      |             |
| IND.          |  | _  | <u> </u>   | ┛┛   | <b></b>  | ┛┛          |
| TOTAL<br>DEP. | 1 .  |  |  |  |  |             |
| TOTA          | Ę  |  |  |  | 100  |             |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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